REQUEST FOR

CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to:
Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

	IFU REE #2857
Application No.	09/830,727
Filing Date	April 30, 2001
First Named Inventor	Donald George Richardson
Group Art Unit	2857
Examiner Name	Edward Raymond
Attomey Docket No	211016

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05/12/2004 RMEBRAHT 00000082

385.00 DA

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This is a Requ		or 27 CED 1			
Tino io a recqu	est for Continued Examination (RCE) und	EI 37 CFK I	.114 of the above-ic	lentified application	1.
a. Pri		iv.	Form PTO-1449 Copies of Reference (except for U.S. patents) Other:	ces listed in Form Form Form and applications)	
	her:				
a. 🔀 Ple du	RCE fee under 37 CFR 1.17(e) is required by 37 CF ease charge Deposit Account No. 12-1216 plicate copy of this transmittal sheet is end RCE fee of \$385.00 (small entity) require	in the total closed herev	amount indicated be with.	elow. A	
ii.	One-month extension of time fee of \$110				
iii.	Petition for an extension of time for the padditional period necessary to render the Deposit Account No. 12-1216 for the ap	period noted e present su	above, as well as for	•	
iv.	Suspension of action fee of \$130.00 (37 Other:			anacit Account	¢295 ∩
v. □	Other:	al amount that harge any d	to be charged to De eficiencies in the ab	·	\$385.0
v. □	Other: Total e Commissioner is hereby authorized to c	al amount tharge any d	to be charged to De eficiencies in the ab	ove fees or to	\$385.0
v. □	Other: Total e Commissioner is hereby authorized to cedit any overpayments to Deposit Account SIGNATURE OF APPLICANT,	al amount tharge any display No. 12-121	to be charged to De eficiencies in the ab	ove fees or to	\$385.0
v. D	Other: Total e Commissioner is hereby authorized to cedit any overpayments to Deposit Account SIGNATURE OF APPLICANT,	al amount tharge any display No. 12-121	to be charged to Description of the above of the second of	ove fees or to	\$385.0
b. Mame (Print/Type)	Other: Total e Commissioner is hereby authorized to cedit any overpayments to Deposit Account SIGNATURE OF APPLICANT,	al amount that harge any de No. 12-121	to be charged to Deficiencies in the above on No. (Attorney/Agent)	ove fees or to IRED 52,651 (telephone)	\$385.0
v b. \times The cree Name (Print/Type) Signature	Other: Total e Commissioner is hereby authorized to cedit any overpayments to Deposit Account SIGNATURE OF APPLICANT, John T. Bretscher Leydig, Voit & Mayer, Ltd. Two Prudential Plaza, Suite 4900 180 North Stetson Avenue	harge any d No. 12-121 Registration	to be charged to Deficiencies in the above of the AGENT REQUES on No. (Attorney/Agent) May 7, 2004 (312) 616-5600 (312) 616-5700 (telephone) facsimile)	\$385.0
b. The cree Name (Print/Type) Signature Address I hereby certify the in an envelope address	Other: Total e Commissioner is hereby authorized to dedit any overpayments to Deposit Account SIGNATURE OF APPLICANT, John T. Bretscher Leydig, Voit & Mayer, Ltd. Two Prudential Plaza, Suite 4900 180 North Stetson Avenue Chicago, Illinois 60601-6780	harge any dano. 12-121 ATTORNEY Registration Date Phone TRANSMIS N, \times being deposited.	eficiencies in the above on No. (Attorney/Agent) May 7, 2004 (312) 616-5600 (312) 616-5700 (31	telephone) facsimile) FR 1.8 tates Postal Service as	first class ma
b. The cree Name (Print/Type) Signature Address I hereby certify that in an envelope address transmitted to the	Other: Total e Commissioner is hereby authorized to condition and overpayments to Deposit Account SIGNATURE OF APPLICANT, John T. Bretscher Leydig, Voit & Mayer, Ltd. Two Prudential Plaza, Suite 4900 180 North Stetson Avenue Chicago, Illinois 60601-6780 CERTIFICATE OF MAILING OR It this RCE Transmittal is, on the date indicated below the steel of	harge any dano. 12-121 ATTORNEY Registration Date Phone TRANSMIS N, \times being deposited.	eficiencies in the above on No. (Attorney/Agent) May 7, 2004 (312) 616-5600 (312) 616-5700 (31	telephone) facsimile) FR 1.8 tates Postal Service as	first class ma